
ATTN: _____

SUBJECT: REQUEST FOR CERTIFICATE OF INSURANCE

Dear Sir/Madam,

This department is interested in issuing a purchase order to you to provide materials and/or services as previously discussed. Before a purchase order can be issued, you must meet the following insurance requirements:

1. **Certificate of Insurance**. A certificate of insurance, showing the City of Long Beach as the certificate holder at the address given below, must be filed with the City before the purchase order is issued. The certificate must evidence the following insurance placed with an insurer admitted to write insurance in California or an authorized non-admitted insurer having a rating of or equivalent to A:VIII by A.M. Best Company:
 - a. **Commercial general liability** (equivalent in coverage to ISO form CG 00 01 11 85 or 88), including cross-liability protection and broad form contractual liability, in an amount not less than \$1,000,000 combined single limit for each occurrence. If the policy has a general aggregate limit, the general aggregate limit must be in an amount not less than \$2,000,000. The "City of Long Beach, its officials, employees, and agents" must be named as additional insureds and such coverage must not be limited to the vicarious liability or supervisory role of the additional insured.
 - b. **Automobile liability** (equivalent in coverage to ISO form CA 00 01 06 92) in an amount not less than \$500,000 combined single limit per accident for bodily injury and property damage covering Auto Symbol 1 (Any Auto).
 - c. **Professional liability or errors and omissions** in an amount not less than \$1,000,000 per occurrence If you are providing accounting, actuarial, architectural, auditing, brokerage, computer programming, consulting, counseling, daycare, engineering, environmental, landscape architectural, legal, medical, nursing, pastoral, surveying, real estate, soils engineering, or other professional services.
 - d. **Workers' compensation and employer's liability** in an amount not less than \$1,000,000 per accident if workers' compensation coverage is required by the California Labor Code.
2. **Endorsements**. All applicable original endorsements must also be filed with the City of Long Beach before the purchase order is issued, including but not limited to:
 - a. An additional insured endorsement (equivalent in coverage to ISO form CG 20 10 11 85 or CG 20 26 11 85) naming "The City of Long Beach, its officials, employees and agents" as additional insureds under the general liability policy. Failure to comply with this requirement will prevent me from issuing a purchase order.
 - b. An endorsement to each policy stating that such policy shall not be cancelled by either party or reduced in coverage except after thirty (30) days prior written notice to City and that the policy shall apply on a primary non-contributing basis in relation to any insurance or self-insurance, primary or excess, maintained by or available to City or any employee or agent of City.

3. **Special Risks.** Additional insurance requirements may be imposed on certain risks:
- a. Construction contracts;
 - b. Medical, daycare, excavation, drilling, trenching or shoring services, or services involving explosives or pyrotechnics;
 - c. Environmental consulting, engineering or related services or operations, including brownfields' redevelopment;
 - d. Custom manufactured products;
 - e. Products or services involving firearms, tobacco, alcohol, or controlled substances;
 - f. Marine-related products or services;
 - g. Aircraft-related products or services; or
 - h. Any unusual or high-risk activities, operations or products.

Any waiver or modification of the insurance requirements can only be made by the City's Purchasing Agent or City's Risk Manager or designee at City's discretion.

The original certificate and any applicable endorsements should be mailed to me at the following address:

City of Long Beach
Attn: _____

Long Beach CA _____

Please have your agent fax me a copy of the certificate and applicable endorsements. My fax number is 562/_____. I should have the certificate in my office no later than the close of business on _____. If you have questions, please contact me at 562/_____.

Sincerely,